TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL	L TRANSMITTAL NUMBER: 93-23	2. STATE Minnesota
FOR: HEALTH CARE FINANCING ADMINISTRATION		
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES 5. TYPE OF PLAN MATERIAL (Check One):	4. PROPOSED EFFECTIVE DATE August 11, 2003	
□ NEW STATE PLAN □ AMENDMENT TO BE CO	ONSIDERED AS NEW PLAN	V AMENIDATE VIT
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AME	ENDMENT (S	X AMENDMENT
5. FEDERAL STATUTE/REGULATION CITATION:	7. FEDERAL BUDGET IMPACT:	each amendment)
§1902(a)(11)(B) of the Act; 42 CFR §431.615	a. FFY '03 b. FFY '04	\$0 \$0
3. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPE	
Att. 4.16-A, Agreement #1, pages 1-3 + Addendum	OR ATTACHMENT (If Applicab	le):
The Moral Agreement Wit, pages 1 17 Mudendum	same	
	Same	
0. SUBJECT OF AMENDMENT:		
Agreement with Title V Grantees - Maternal and Child Health Services		
11. GOVERNOR'S REVIEW (Check One):		
x GOVERNOR'S OFFICE REPORTED NO COMMENT  ☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED  ☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	□ OTHER, AS SPEC	CIFIED:
2. SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO:	
2. W.	Stephanie Schwartz	
. /	Minnesota Department of Human Se	rvices
11) my 3 Comes	Federal Relations Unit	
// Jan & Com	444 Lafayette Road No.	
	St. Paul, MN 55155-3852	***************************************
3. TYPED NAME: Jary B. Kennedy		
FOR REGIONAL O	FFICE USE ONLY	
17. DATE RECEIVED:	18. DATE APPROYED:	
	ONE COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL:	20. SIGNATURE OF REGIONAL OFFICIAL:	
Kugnst 11, 2003	Ca gold of	mb
21. TYPED NAMÉ!	22. TITLE: Associate Regional Administrator Division of Medicaid and Children's Health	
Cheryl A. Harris	Division of Medicaid and	Unildren's Health
23. REMARKS:		
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	SEP 2 6 2003	
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# MINNESOTA **MEDICAL ASSISTANCE**

Federal Budget Impact of Proposed State Plan Amendment TN 03-23 Attachment 4.16-A, #1: Agreement with Title V Grantees - Maternal & Child Health Services

The Department anticipates no federal fiscal impact. This agreement will impact 382,000 recipients throughout the term of the agreement.

#### STATE OF MINNESOTA

### INTERAGENCY MEMORANDUM OF UNDERSTANDING

WHEREAS, the Minnesota Department of Health is responsible for administrating the Title V program pursuant to Minnesota Statutes, section 145.88; and

WHEREAS, the Department of Human Services is responsible for administrating the Medicaid program pursuant to Minnesota Statutes, section 256.01, subdivision 2, paragraph (1), and 256B.04, subdivision 1; and

WHEREAS, the Department of Human Services and the Department of Health are committed to promoting quality health care services for low-income children, pregnant women and children with special health care needs, including primary and preventive health services; and

WHEREAS, the Department of Health and the Department of Human Services are interested in coordinating and enhancing efforts, streamlining application processes, reducing duplicative efforts, and ensuring compliance with federal and state laws and regulations and the appropriate use of public funds:

# NOW, THEREFORE, it is agreed:

- I. Duties of the Department of Human Services. The Department of Human Services shall:
  - A. Participate as requested on Department of Health advisory or work groups related to maternal and child health issues including children with special health care needs.
  - B. Participate in quarterly joint meetings. Membership shall consist of the Medicaid Director or a designee and at least three additional appointees from the Department of Human Services. Purpose of the meetings to include:
    - 1. Coordinate departmental policies/procedures that impact health care services or the delivery of health care services to the maternal and child health populations.
    - 2. Identify annually at least one issue related to maternal or child health or children with special health care needs for joint departmental focus.
    - 3. Identify how the departments can work together to identify individuals under 21 in need of medical or remedial services
    - 4. Identify areas where the departments could share or maximize staff expertise.
    - 5. Share appropriate and relevant aggregate data affecting health status or the delivery of health care services to the maternal and child health population and children with special health care needs.
    - 6. Review at least annually this Memorandum of Understanding and determine if any changes are required.

STATE: MINNESOTA Enter into separate Interagency Agreements for those duties that require a transfer of personally Effective: August 11, 2008entifying data and funds.

TN: 03-23

Approved: Supersedes: 00-18 (97-17) Page 1 of 4

D. Accept referrals from the Department of Health for the Medical Assistance and MinnesotaCare program.

Duties of the Department of Health. The Department of Health shall:

- A. Participate as requested on Department of Human Services advisory or work groups related to maternal and child health issues including children with special health care needs.
- B. Participate in quarterly joint meetings. Membership shall consist of the Title V Director or a designee and at least three additional appointees from the Department of Health. Purpose of the meetings to include:
  - 1. Coordinate departmental policies/procedures that impact health care services or the delivery of health care services to the maternal and child health populations.
  - 2. Identify annually at least one issue related to maternal or child health or children with special health care needs for joint departmental focus.
  - 3. Identify how the departments can work together to identify individuals under 21 in need of medical or remedial services.
  - 4. Identify areas where the departments could share or maximize staff expertise.
  - 5. Share appropriate and relevant aggregate data affecting health status or the delivery of health care services to the maternal and child health population and children with special health care needs.
  - 6. Review at least annually this Memorandum of Understanding and determine if any changes are required.
- C. Enter into separate Interagency Agreements for those duties that require a transfer of personally identifying data and funds.
- D. Accept referrals from the Department of Human Services and provide follow-up services to children with special health care needs and their families as requested.
- II. <u>TERMS OF AGREEMENT</u> This agreement shall be effective on July 1, 2003, or upon the date that the final required signature is obtained, whichever occurs later, or until a revised agreement is signed.
- III. CANCELLATION This agreement may be cancelled by either department at any time, with or without cause, upon thirty (30) days written notice to the other party.
- IV. AUTHORIZED REPRESENTATIVES The Department of Health's authorized representative for the STATE: MINNESOFA sees of administration of this agreement is Janet Olstad. The Department of Human Services Effective: August 11/2002 and representative for the purposes of administration of this agreement is Susan Castellano. Each TN: 03-23

  Approved: representative shall have final authority for acceptance of services of the other party.

Supersedes: 00-18 (97-17)

- V. ASSIGNMENT Neither the Department of Health nor the Department of Human Services shall assign assign or transfer any rights or obligations under this agreement without the prior written consent of the other party.
- VI. <u>AMENDMENTS</u> Any amendments to this agreement shall be in writing, and shall be executed by the same parties who executed the original agreement, or their successors in office.
- VII. <u>LIABILITY</u> The Department of Health and the Department of Human Services agree that each party will be responsible for its own acts and the results thereof to the extent authorized by law and shall not be responsible for the acts of any others and the results thereof. The Department of Health and the Department of Human Services liability shall be governed by the provisions of the Minnesota Tort Claims Act, Minnesota Statutes, section 3.376, and other applicable law.
- VIII. <u>DATA PRACTICES ACT</u> The Department of Health and the Department of Human Services agree to comply with the Minnesota Data Practices Act as it applies to all data provided by the other agency in accordance with this agreement and as it applies to all data created, gathered, generated or acquired in accordance with this agreement.
- IX. <u>JURISDICTION AND VENUE</u> This agreement, and amendments and supplements thereto, shall be governed by the laws of the State of Minnesota. Venue for all legal proceedings arising out of this agreement, or breach thereof, shall be in the state or federal court with competent jurisdiction in Ramsey County, Minnesota.

IN WITNESS WHEREOF, the parties have caused this agreement to be duly executed intending to be bound thereby.

APPROVED:

Department of Health:

Department of Human Services:

By (authorized signature)	By (authorized signature)
Van Verrell	Many & Kenney
Title MCH Director	Title Med 1 Drech
Date 8/11/03	Date 08/11/03

STATE: MINNESOTA Effective: August 11, 2003

TN: 03-23 Approved:

Supersedes: 00-18 (97-17)

# ADDENDUM TO ATTACHMENT 4.16-A

Agreement #1

In accordance with 42 CFR §431.615(d)(5)(i), the Department contracts with counties to
perform outreach and follow-up EPSDT services for EPSDT-eligible children.
Specifically, in order to identify children under 21 in need of medical or remedial
services, the Department receives screening and referral information from managed care
health plans that is fed into the Department's "CATCH H 3" tracking system. This
information is downloaded to the counties for use in performing outreach activities to
families to encourage children to receive EPSDT screenings. It is also used for referral
follow-up activities that assist families and children to receive needed services as a result
of problems found during EPSDT screenings.

Because the Minnesota Department of Health is not a partner in the CATCH  $\underline{H}$   $\underline{3}$  tracking system, these specifics are not made a part of the Interagency Memorandum of Understanding.

☐ In accordance with 42 CFR §431.615(d)(5)(iv), the Department contracts with the Minnesota Department of Health to provide training to providers. The health department trains nurses to conduct EPSDT visits and trains private Medicaid providers on EPSDT service requirements. Additionally, the health department responds to requests for specific trainings from any EPSDT provider in Minnesota. In sum, the Minnesota Department of Health provides technical assistance to Medicaid EPSDT providers.

STATE: MINNESOTA Effective: August 11, 2003

TN: 03-23 Approved:

Supersedes: 00-18 (97-17)